

North Carolina Department of Environment and Natural Resources Division of Waste Management Solid Waste Section

INVOICE 2012

Make checks payable to **N.C. Division of Waste Management, Solid Waste Section**, include Permit Number and invoice number on check. If you are paying by electronic transfer, include the invoice number with your electronic transfer. [G.S. 25-3-506: A \$25.00 processing fee will be charged on all returned checks.] Please return a copy of this invoice with your payment.

Contact/Billing Information:	Facility Location Address:		
Ms. Karen Hall, Administrative Program Officer Cumberland County 698 Ann Street Fayetteville, NC 28301	Cumberland County HHW Collection Facility 923 Wilkes Road Fayetteville, NC 28301		

INVOICE NUMBER	INVOICE DATE	DUE DATE	AMOUNT DUE
SW012-0075	10-19-2012		\$1,250.00

- A. <u>Permit Fee Requirements:</u> Pursuant to North Carolina General Statute 130A-295.8 you are required to pay fee(s) based on your solid waste management activities. The fee(s) shall be used to support the solid waste management program. An application is deemed incomplete until all fees are received.
- B. Explanation of Invoice Amount is Based on Facility's Current Permit Application

Facility Permit #	Facility Type	Application Type	Application Date	Fee	Total Amount
26FH-HHW	HHW	Amendment (5 Year Renewal)	10-17-2012	\$1,250.00	\$1,250.00
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				Amount Paid	\$0.00

C. Remit Payment (including a copy of this invoice) To:

Division of Waste Management Solid Waste Section 1646 Mail Service Center Raleigh, NC 27699-1646 Attn: Ellen Lorscheider

D. Solid Waste Contacts:

1. Questions about billing process: Liz Patterson at (919) 707-8286 or Elle

2. Questions about the Regulations and Technical Assistance:

Ed Mussler (919) 707-8281

Landfills, Transfer Stations

Michael Scott (919) 707-8246

Land Application Sites, Compost Facilities

CK# 745802 \$1,250,00 16/2/2012

E. <u>Update Your Information:</u> Please indicate any changes in Facility or Contact Information.

PERMIT APPLICATION REVIEW FORM

Review Requested by: Ming-Tai Cl	hao Date Requested: 10/17/2012		
Facility Name and Permit ID	Cumberland County HHW Collection Facility 26FH-HHW-		
Applicant (Owner) Name	Cumberland County		
Description of Permit Request [This is the action the applicant is requesting in accordance with NCGS 130A-295.8(b)]	 □ (1)a. New – New Facility □ (1)b. New – Expand Facility Boundary □ (1)c. New – Expand Waste Boundary □ (1)d. New – Substantial Amendment □ (2)a. Amendment – Next Phase of the Approved Facility Plan ⋈ (2)b. Amendment – Five-year Renewal □ (2)c. Amendment – Change in Ownership □ (3)a. Modification – Change to Approved Plans (No CHR) □ (3)b. Modification – Subsequent Permit to Operate (No CHR) 		
Permit Fee	\$1,250		
Date Application Received	10/17/2012		
Contact Name, Title & Phone No.	Karen Hall, Administrative Program Officer, 910-321-6929		
Contact Email Address	khall@co.cumberland.nc.us		
Company Name	Cumberland County		
911 Address	923 Wikes Road, Fayetteville, NC		
Mailing Address	698 Ann Street		
City/State/Zip	Fayetteville, NC 28301		
Parent Company	Cumberland County		
Known Subsidiaries	none		
Other Known Related or Associated Business Names	none		
Known Counties of Operation	Cumberland County		
Does the Applicant have a Past Or Current Solid Waste Permit?	Yes ⊠ No □ Unknown □ Facility Type: MSW & CDLF Permit No.: 96-01		
Did the Permit Applicant Submit Financial Assurance Cost Estimates?	Yes □ No □ N/A□ Not Needed ⊠		
Other Notes	Enter Other Notes		